# hawk-i

## Impact on Access and Health Status Second Evaluation Report–Executive Summary January 2002

The second evaluation report for the Healthy and Well Kids in Iowa (hawk-i) program presents an estimate of the effect that providing hawk-i health insurance had on 1036 previously uninsured children. hawk-i is part of the Iowa State Child Insurance Program (SCHIP) for children between 133% and 200% of the federal poverty level. This study compares the results of a survey that asked about children's access to care, health status and family environment in the year prior to joining hawk-i with one that asked about their experiences while in hawk-i. Using standard statistical tests to evaluate differences in responses before and after hawk-i, the following was determined:

#### Medical care

After being in the hawk-i program for a year:

- children needed health care at rates similar to when they joined, however,
- they were less likely to be stopped from getting needed care (21% before vs. 6% after),
- they were less likely to be delayed from getting needed care (34% before vs. 10% after),
- there were more visits per child to a doctor's office or clinic,
- children were more likely to have 'always' received needed care for an illness or injury.

## Specialty care

After being in hawk-i for a year:

- children needed to see a specialist at rates similar to when they joined, however,
- they were less likely to be stopped from getting specialty care (38% before vs. 13% after),
- they were less likely to be delayed from getting specialty care (39% before vs. 23% after).

#### Emergency room care

After being in hawk-i for a year:

• fewer children had visits to the emergency room in the past year (45% before vs. 38% after).

#### Dental care

After being in hawk-i for a year:

- children needed dental care at the same rate as when they joined, however,
- they were more likely to have a regular source of dental care (84% before vs. 88% after),
- they were less likely to be stopped from getting dental care (25% before vs. 8% after).
- they were less likely to be delayed from getting dental care (27% before vs. 9% after),
- they were more likely to have had a dental visit in past year (55% before vs. 69% after).

## Preventive care

After being in hawk-i for a year:

- children were more likely to have 'always' received needed routine preventive care (e.g., physical exams or vaccinations),
- they were also as likely to receive anticipatory guidance (preventive counseling) as before they joined.

#### Other care

### After being in hawk-i for a year:

- children had a similar need for vision care, however,
- they were less likely to have been stopped from receiving vision care (41% before vs. 15% after).
- children had a similar need for behavioral or emotional care, however,
- they were less likely to have been stopped from receiving behavioral or emotional care (44% before vs. 15% after),
- children had a similar need for prescription medicine, however,
- they were less likely to have been stopped from receiving prescription medicines (20% before vs. 10% after).

#### Health status

## After being in hawk-i for a year:

- children's overall health status was rated higher (43% were rated in excellent health before vs. 47% after).
- \* more children's health was thought to be better than one year earlier (26% before vs. 32% after).
- children had fewer sick days in the previous 4 weeks (74% before without a sick day vs. 82% after).
- 1 in 4 children with a chronic condition had the condition detected because of care provided while in the hawk-i program.



### Impact on families

## After being in hawk-i for a year:

- stress was reduced in 95% of families,
  - more than three quarters said it had reduced stress "a lot,"
- worry about the ability to pay for health care was reduced significantly,
- the activities of significantly fewer children were limited because of the concerns about health care costs.
- \* significantly more parents had health insurance one year after their children started on the hawk-i program.

#### Health plans

## After being in hawk-i for a year:

- one in five children had to get a new personal doctor or nurse,
- one in four had a problem finding a personal doctor or nurse they were happy with,
- one in three did not know that their health plan had a help line they could call for assistance.

The University of Iowa's, Public Policy Center conducted this research for the Iowa Department of Human Services. To receive a copy of the report or for more information about this evaluation of the *hawk-i* program, please contact:

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Or you can view/download the full hawk-i Second Evaluation report at: http://ppc.uiowa.edu/hawk-i

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